



PTO/SB/81 (09-03)

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INDICATION FORM**

Application Number	10/800,155
Filing Date	03/13/2004
First Named Inventor	Wolfgang HAAS
Title	Continuously Variable Transmission
Art Unit	
Examiner Name	
Attorney Docket Number	0809 A US

I hereby appoint:



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Firm or
Individual Name

Alfred J. Mangels

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Address

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I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Wolfgang HAAS

Signature

Date

06.04.2004

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

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<input type="checkbox"/> Firm or Individual Name	Alfred J. Mangels				
Address	4729 Cornell Road				
Address					
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Country	U.S.A.				
Telephone	513-469-0470	Fax	513-489-6030		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Oswald FRIEDMANN		
Signature	<i>Oswald Friedmann</i>		
Date	5-4-04	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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